

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
	1	1					
2	1						
3							
4							
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26	1						
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36	1						
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39	1						
40	1						
41	1						
42	1						
43	1						
44	1						
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49							
50							
TOTAL IND.	7	1	1	1	1	1	
TOTAL DEP.							
TOTAL CLAIMS							

	*		*		*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
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* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS